



**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/735,470
Filing Date	December 12, 2003
First Named Inventor	Kumar, Anand R.
Group Art Unit	3627
Examiner Name	Not yet known
Attorney Docket Number	717841.4

I hereby appoint:

☒ Practitioners at Customer Number

27128

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

27128

OR

☐ The address associated with Customer Number:

OR

<input type="checkbox"/> Firm or Individual Name	Mark E. Stallion Blackwell Sanders Peper Martin LLP				
Address	720 Olive Street				
Address	24th Floor				
City	St. Louis	State	Missouri	Zip	63101
Country	United States				
Telephone	314-345-6000	Fax	314-345-6060		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.7.1.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	Wally Goulet, Vice President and General Counsel National Information Solutions Cooperative, Inc.
Signature	<i>Wally Goulet</i>
Date	MAY 14 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in the form, call 1-800-PTO-9199 and select option 2.



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PTO/SB/96 (08-00)  
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

### STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Anand R. Kumar et al.

Application No./Patent No.: 10/735,470

Filed/Issue Date: December 12, 2003

Entitled: METHOD AND APPARATUS FOR PROVIDING INTEGRATED CUSTOMER CARE AND WORK-FLOW MANAGEMENT

National Information Solutions Cooperative, Inc., a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_ %

in the patent application/patent identified above by virtue of either:

- A. [ x ] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

- B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

[ ] Additional documents in the chain of title are listed on a supplemental sheet.

- [ x ] Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

May 20, 2004  
Date

Wally Goulet  
Typed or printed name  
[Signature]  
Signature

Vice President and General Counsel

Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231



Please type a plus sign (+) inside this box → ☒

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted With Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	717841.4
First Named Inventor	Kumar, Anand R.
<b>COMPLETE IF KNOWN</b>	
Application Number	10/735,470
Filing Date	December 12, 2003
Group Art Unit	3627
Examiner Name	Not yet known

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR PROVIDING INTEGRATED CUSTOMER CARE AND WORK-FLOW MANAGEMENT

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YY)

12/12/2003

as United States Application Number or PCT International (if applicable).

Application Number

10/735,470

and was amended on (MM/DD/YY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/511,154	10/14/2003	

[Page 1 of 6]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commissioner for Patents, Box Design, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number  
or Bar Code Label

27128

OR ☐ Correspondence address below

Name Mark E. Stallion

Address Blackwell Sanders Peper Martin LLP

Address 720 Olive Street, Suite 2400

City St. Louis

State Missouri

ZIP 63101

Country US

Telephone 314-345-6000

Fax 314-345-6060

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any]) Anand R.Family Name  
Or Surname KumarInventor's  
Signature

M.R. Anand Kumar

Date 5/6/04

Residence City: Bismarck

State ND

Country US

Citizenship IN

Mailing Address 1727 N. Grandview Lane

Mailing Address #108

City Bismarck

State ND

ZIP 58503

Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any]) Michael A.Family Name  
Or Surname FrankInventor's  
Signature

Michael A. Frank

Date 5-6-04

Residence City: Mandan

State ND

Country US

Citizenship US

Mailing Address 703 10th Ave SW

Mailing Address

City Mandan

State ND

ZIP 58554

Country US

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 2 of 6]

Please type a plus sign (+) inside this box



PTO/SB/04 (10-00)

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# DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

## ADDITIONAL INVENTOR(S) SUPPLEMENTAL SHEET

Attorney Docket Number: 717841.4

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given

Name Connie L.

Family Name

Or Surname Schaner

Inventor's  
Signature

Connie L. Schaner

Date 5/6/04

Residence City: Mandan

State ND

Country US

Citizenship US

Mailing Address 2201 Wolfsong Loop South

Mailing Address

PO Box 194

City Mandan

State ND

ZIP 58554

Country US

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Kelley C.

Family Name

Or Surname Kunnanz

Inventor's  
Signature

Kelley C. Kunnanz

Date 5/6/04

Residence City: Bismarck

State ND

Country US

Citizenship US

Mailing Address 7211 Moonlight Road

Mailing Address

City Bismarck

State ND

ZIP 58503

Country US

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 3 of 6]

Please type a plus sign (+) inside this box



PTO/SB/04 (10-00)

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## DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

### ADDITIONAL INVENTOR(S) SUPPLEMENTAL SHEET

Attorney Docket Number: 717841.4

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Brent

Family Name Or Surname Roberts

Inventor's Signature *Brent Roberts*

Date 5-17-04

Residence City: St. Peters

State MO

Country US

Citizenship US

Mailing Address 108 Glenallen Drive

Mailing Address

City St. Peters

State MO

ZIP 63376

Country US

NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) William

Family Name Or Surname Frame

Inventor's Signature *William K. Frame*

Date 5/10/2004

Residence City: Sunriver

State OR

Country US

Citizenship US

Mailing Address 17268 Jacinto Road

Mailing Address

City Sunriver

State OR

ZIP 97707

Country US

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box



PTO/SB/04 (10-00)

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## DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

### ADDITIONAL INVENTOR(S) SUPPLEMENTAL SHEET

Attorney Docket Number: 717841.4

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Rex

Family Name Or Surname Moorman

Inventor's Signature

Date

5/17/04

Residence City: Foristell

State MO

Country US

Citizenship US

Mailing Address 2945 Meyer Road

Mailing Address

City Foristell

State MO

ZIP 63348

Country US

NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Channon O.

Family Name Or Surname Lowman

Inventor's Signature

Date

5/16/04

Residence City: Mandan

State ND

Country US

Citizenship US

Mailing Address 2508 Sunset Drive

Mailing Address

City Mandan

State ND

ZIP 58554

Country US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 5 of 6]

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PTO/SB/04 (10-00)

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## DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

### ADDITIONAL INVENTOR(S) SUPPLEMENTAL SHEET

Attorney Docket Number: 717841.4

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF NINTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given  
Name Eric

Family Name  
Or Surname Burke

Inventor's  
Signature *Eric Burke*

Date 5-17-04

Residence City: O'Fallon

State MO

Country US

Citizenship US

Mailing Address 36 Saint Nicholas Ct.

Mailing Address

City O'Fallon

State MO

ZIP 63366

Country US

NAME OF INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
Or Surname

Inventor's  
Signature

Date

Residence City:

State ND

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

☐ Additional inventors are being named on the \_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



ASSIGNMENT

COPY

PATENT  
Mtr #717841.5

WHEREAS, Anand R. Kumar, a resident of Bismarck, North Dakota; Michael A. Frank, a resident of Mandan, North Dakota; Connie L. Schaner, a resident of Mandan, North Dakota; Kelley C. Kunnanz, a resident of Bismarck, North Dakota; Brent Roberts, a resident of St. Peters, Missouri; William Frame, a resident of Sunriver, Oregon; Rex Moorman, a resident of Foristell, Missouri; Channon O. Lowman, a resident of Mandan, North Dakota; and Eric Burke, a resident of O'Fallon, Missouri (hereinafter referred to as "Assignors"), are the inventors of a certain new and useful invention relating to a METHOD AND APPARATUS FOR PROVIDING INTEGRATED CUSTOMER CARE AND WORK-FLOW MANAGEMENT for which application for Letters Patent was made as U.S. Provisional Application No. 60/511,154 on October 14, 2003 and as U.S. Patent Application No. 10/735,470 that was filed on December 12, 2003; and

WHEREAS, Assignors are the owners and in full possession of the entire right, title and interest in and to said invention and in and to any and all Letters Patent that may be granted therefor; and

WHEREAS, National Information Solutions Cooperative, Inc., a corporation duly organized under the laws of the State of North Dakota, (hereinafter referred to as "Assignee"), having its principal office and place of business at 4178 N. Service Road, St. Peters, Missouri 63376, is desirous of acquiring the entire right, title and interest in and to said invention and in and to any and all Letters Patent that may be granted therefor; and

NOW, THEREFORE, for and in consideration of the sum of One Dollar (U.S. \$1.00) and other valuable considerations to Assignors paid by said Assignee, receipt of which is hereby acknowledged, Assignors do hereby sell, assign and transfer unto said Assignee, the entire right,

2 of 10

IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated: 5/6/2004

Michael A. Frank  
Michael A. Frank

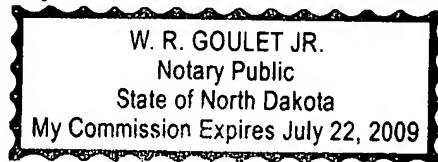
STATE OF NORTH DAKOTA )  
 ) ss.  
COUNTY OF MORTON )

On this 6<sup>th</sup> day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Michael A. Frank to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

W. R. Goulet Jr.  
Notary Public

My Commission Expires:



IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated: 5/6/04

Connie L. Schaner  
Connie L. Schaner

Connie L. Schaner

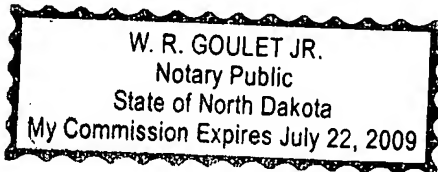
STATE OF *NORTH DAKOTA*)  
COUNTY OF *MORTON*) ss.

On this 6<sup>th</sup> day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Connie L. Schaner to me known to be the person described in and who executed the foregoing instrument, and acknowledged that she executed the same as her free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

My Commission Expires:

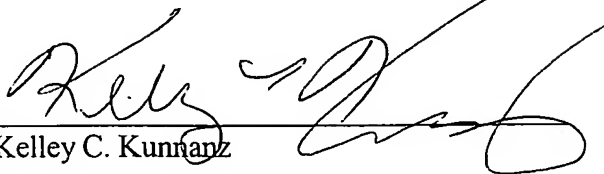


IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated:

5/6/09

Kelley C. Kunnanz



STATE OF NORTH DAKOTA)

) ss.

COUNTY OF Morton )

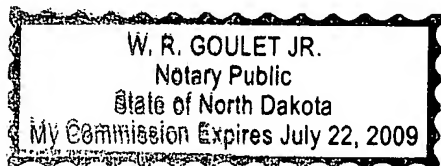
On this 6<sup>th</sup> day of MAY, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Kelley C. Kunnanz to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Notary Public

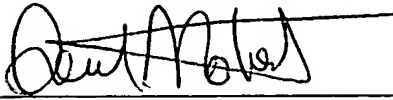


My Commission Expires:



IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated: 5-17-04

  
Brent Roberts

STATE OF Missouri )  
COUNTY OF St Charles ) ss.

On this 17 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Brent Roberts to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

  
Notary Public

My Commission Expires:

GLORIA A. JOHNSTON  
Notary Public - State of Missouri  
St. Charles County  
My Commission Expires: July 5, 2004

IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated:

5/10/2004

William A. Frame  
William Frame

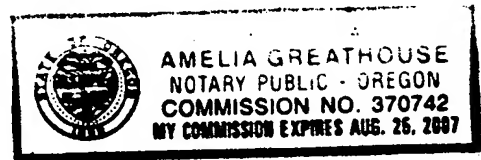
STATE OF Oregon )  
 ) ss.  
COUNTY OF Deschutes )

On this 10 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared William Frame to me ~~known to be~~ proved to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

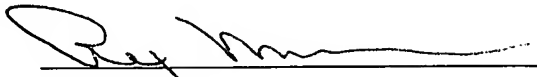
Amelia Greathouse  
Notary Public

My Commission Expires: August 25, 2007



IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.


Dated: 5/17/04

  
Rex Moorman

STATE OF Missouri )  
COUNTY OF ST Charles ) ss.

On this 17 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Rex Moorman to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

  
Notary Public

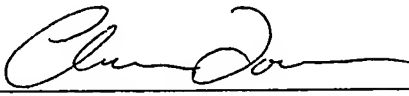
My Commission Expires:

GLORIA A. JOHNSTON  
Notary Public - State of Missouri  
St. Charles County  
My Commission Expires: July 5, 2004



IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

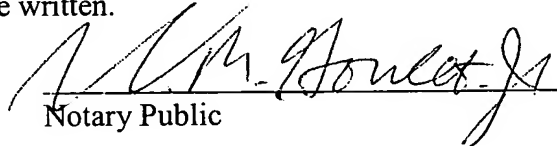
Dated: 5/6/04

  
Channon O. Lowman

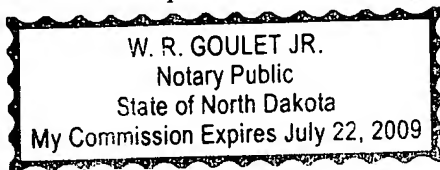
STATE OF NORTH DAKOTA)  
COUNTY OF MORTON) ss.

On this 6<sup>th</sup> day of MAY, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Channon O. Lowman to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

  
Notary Public

My Commission Expires:



IN WITNESS WHEREOF, Assignor has hereunto set his hand and seal.

Dated: 5-17-04

Eric Burke  
Eric Burke

STATE OF Missouri )  
COUNTY OF ST Charles ) ss.

On this 17 day of May, 2004, before me, the undersigned, a Notary Public within and for the County and State aforesaid, personally appeared Eric Burke to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

In Witness Whereof, I have hereunto attached my hand and notarial seal, at the County and State aforesaid on the day and year last above written.

Gloria A Johnston  
Notary Public

My Commission Expires:

GLORIA A. JOHNSTON  
Notary Public - State of Missouri  
St. Charles County  
My Commission Expires: July 5, 2004